RCE

								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001									Ć	09/1	76	1,77	75
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER SMALL	
ТО	TAL CLAIMS						RATE			FEE	 	RATE	FEE
FO			NUMBER FILED NU			ER EXTRA		BASIC I	FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			min	us 20=	*			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			mir	nus 3 =	*		j	X42=			OR	X84=	
MUI	LTIPLE DEPEN	DENT CLAIM PF	RESENT				+140=				OR	+280=	
* If 1	the difference	in column 1 is	less than zero, enter "0" in column 2				l	TOTAL			OR	TOTAL	
	CLAIMS AS AMENDED - PART II							1017	\L		I On	OTHER	ΤΗΔΝ
	(Column 1) (Column 2) (Column 3)						SMAI	LL E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVIO	HEST IBER OUSLY FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQN	Total	*	Minus	**	·	=		X\$ 9)=		OR	X\$18=	
\ME!	Independent	*	Minus	***		=		X42:	=		OR	X84=	
		NTATION OF MI				here-L J	J	+140			OR	+280=	
BEST AVAILABLE COPY						Ĺ	TO	TAL			TOTAL		
(Column 1) (Column 2) (Column 3)							addit. F	FEE		ION	ADDIT. FEE		
_		CLAIMS		HIGH	HEST] [-	\neg	ADDI-			ADDI-
ENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER NOUSLY FOR	PRESENT EXTRA		RATI	E	TIONAL FEE		RATE	TIONAL
ND	Total	*	Minus	**		=]	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AIR	<u> </u>	X42=		=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	+140	l=		OŖ	+280=	
							L A	TO ADDIT. F	TAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)		הווטעה. ר				ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER IOUSLY D FOR	PRESENT EXTRA] [RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MOM	Total	*	Minus	**		=] [X\$ 9	=		OR	X\$18=	
\ME	Independent	*	Minus	***		<u> </u>	 ▍╏	X42:	_		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								_				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=			
**	If the "Highest Nu	mber Previously P	aid For" IN THI	IS SPACE	is less tha	an 20, enter "20.	·" /	ADDIT. F			OR	TOTAL ADDIT. FEE	
	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

04761775

CLAIMS AS FILED - PA (Column 1)					(Column 2)			SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			13				ſ	RATE	FEE) 	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			13 minus 20=		•			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			€ minus 3 =		<u> </u>			X40=		OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT		•			+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "						olumn 2		TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER THAN SMALL ENTITY		
	·	(Column 1)		(Colui		(Column 3)	١.	SMALL E		OR	SMALL	4	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI/ TIONAL FEE	
NDM	Total	· 13	Minus	** 0	20	=		X\$ 9=		OR	X\$18=/		
AME	Independent	. 6	Minus	***	T CLAIM	=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						,	+135=		OR	/ +270=		
•	(Column 1) (Column 2) (Column 3)						i	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
										,			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY OFOR	PRESENT		RATE:	ADDI- TIONAL CEEE		RATE	ADDI- TIONAL	
	Total	. 13	Minus		२०	= \	1	X\$ 9=		。 OR	X\$18=		
ME	Independent	. 6	Minus	*** 6)	=		X40=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	105			070		
		BEST A	VAILA	3LE (COP	γ	Y	+135=		ÒŖ	+270= TOTAL		
-								ADDIT. FEE		OR	ADDIT. FEE		
		(Column 1)	_		ımn 2)	(Column 3)	L .					1 14	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**.		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***	IT OLAN	=	4	X40=		OR	X80=	**************************************	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=		OR	+270=	9 / ~	
	If the entry in colu	ımn 1 is less than	the entry in col	umn 2, wri IS SPACE	ite "0" in co	olumn 3. an 20. enter "20)."	TOTAL		OR	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													